

WHAT REFORM MEANS FOR AFRICAN AMERICANS

Insurance Reforms that Save Families Money

- All lifetime limits on how much insurance companies cover if beneficiaries get sick are eliminated, and insurance companies are now prohibited from dropping people from coverage when they get sick. The Act also restricts the use of annual limits in all new plans and existing employer plans this year, until 2014 when all annual limits for these plans are prohibited.

- Going forward, plans in the new Health Insurance Exchanges and all new plans will have a cap on what insurance companies can require beneficiaries to pay in out-of-pocket expenses, such as copays and deductibles.

Financial Relief for Working Families

- Provides tax credits to working families to make sure they can afford quality coverage.
- Tax credits will be made available to small businesses so they can offer competitive, affordable health care to their employees.
- Starting in plan year 2011, States will be able to require health insurance companies to submit justification for requested premium increases, and insurance companies with excessive or unjustified premium exchanges may not be able to participate in the new Exchanges.
- The Act cracks down on excessive insurance overhead starting in 2011 by applying standards to how much insurance companies can spend on non-medical costs, such as bureaucracy, executive salaries, and marketing, and provides consumers a rebate if non-medical costs are too high.

Ends Insurance Company Discrimination

- Insurance companies are now prohibited from denying children coverage based on pre-existing conditions. Going forward, the Act will prohibit insurance companies from denying coverage to all individuals. The Act will also end discrimination that charges beneficiaries more if they are sick and limit the amount an insurance company can increase an individual's premium simply due to their age.
- Access to affordable insurance for uninsured Americans with pre-existing conditions will be made available through a temporary subsidized high-risk pool, which will help protect them from medical bankruptcy. This high risk pool is a stop-gap measure that will serve as a bridge to a reformed health insurance marketplace.

Insurance Security

- Ensures that families always have guaranteed choices of quality, affordable health insurance whether they lose their job, switch jobs, move or get sick, through the creation of Exchanges.

Independent Appeals Process

- Consumers in new plans will have access to a straightforward and independent appeals process to appeal decisions by their health insurance plan.

Increases the Number of Primary Care Practitioners

- Provides new investments to increase the number of primary care practitioners, including doctors, nurses, nurse practitioners, and physician assistants.

National Institute of Minority Health

- Elevates the National Center on Minority Health and Health Disparities at the National Institutes of Health from a Center to a full Institute, reflecting an enhanced focus on minority health.
- Codifies into the law the Office of Minority Health within the Department of Health and Human Services (HHS) and a network of minority health offices within HHS, to monitor health, health care trends, and quality of care among minority patients and evaluate the success of minority health programs and initiatives.

Preventive Care for Better Health

- New plans will be required to cover prevention and wellness benefits at no charge to American families by exempting these benefits from deductibles and other cost-sharing requirements.
- Investment in prevention and public health will encourage innovations in health care that reduce the incidence of illness and disease, which are more costly to treat.
- Ensures that all Americans have access to free preventive services to create a system that prevents illness and disease before they require more costly treatment. This will help African Americans who are often less likely to receive preventive care.

Control Chronic Disease

- Invests in care innovations such as community health teams to improve the management of chronic disease, which help the nearly 50 percent of African Americans who suffer from a chronic disease.

Promote Primary Care

- Invests in the primary care workforce to ensure that all Americans have access to a primary care doctor so they stay healthier, longer. Strengthens the system of safety-net hospitals and provides significant funding for community health centers to ensure high-quality, accessible care.

Fight Health Disparities

- Moves toward elimination of disparities that African Americans currently face both in their health and in their health care by investing in data collection and research about health disparities.
- Expands initiatives to increase the racial and ethnic diversity of health care professionals and strengthen cultural competency training among health care providers.